

Data Transmission System (DTS)

DATE: January 27, 2010

STATUS: ORIGINAL SUBMISSION

Part B, Child count data are due February 1, 2010.

5 Race/Ethnicity Categories

Please read the following basic guidelines before completing the Data Transmission System (DTS) forms:

1. To change the size and appearance of the text on the spreadsheet, select VIEW from the toolbar, select ZOOM, and then select the percentage increase or decrease.
2. Enter the appropriate data into the YELLOW shaded areas on each page of the form. Please be sure to read section heading descriptions so data are entered in the correct section. Also, be sure to enter any State and date information. The two-digit State postal code should appear on every page of the form. A list is available on PAGE1. Use the scroll bar or the up or down arrow keys to scroll through the list. Click on the appropriate State postal code to select it.
3. If you choose to cut and paste data from another area, use the PASTE SPECIAL option and select VALUES. This will protect the current formats.
4. Any comments regarding the submitted data should be entered on the last page of the workbook, titled COMMENTS.
5. Save the completed forms. Please be sure that your State postal code appears in the file name. (Example: Maryland - IDEA08RE5MD.XLS)
6. Each cell in the attached spreadsheet contains a "-9" value by default. If you do not enter a count in each cell it will be determined that the State did not collect the requested data element. In such cases, the State must provide an explanation in the comments section for the missing data. Note that if the submission is missing a required data element, it will not be entered into DANS and the State will be required to resubmit.
7. RED cells indicate computational errors or an error in reporting race/ethnicity. Sum totals for race/ethnicity should equal reported totals for disability. **Please make sure there are NO RED CELLS before saving and submitting data.**
8. Print Page 8 of this workbook by clicking on the Page 8 tab below, and then selecting FILE, PRINT and then select ACTIVE W located in the 'PRINT WHAT' section. Send the printed copy of the completed Child Count certification form to the Office of Special Education Programs (OSEP) at the following address:

Alexa Posny, Acting Director
Office of Special Education Programs
U.S. Department of Education
Part B Data Reports
Program Support Services Group
Mail Stop 2600
550 12th Street, S.W.
Washington, D.C. 20202
Attn: Cheryl Broady
9. Please return electronic copies of completed DTS forms to DAC: IDEAData_PartB@westat.com
10. If you have any questions or comments, please contact Shariece Johnson at (240) 314-2414.

U.S. DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION
AND REHABILITATIVE SERVICES
OFFICE OF SPECIAL EDUCATION
PROGRAMS

TABLE 1

PAGE 1 OF 8

REPORT OF CHILDREN WITH DISABILITIES RECEIVING SPECIAL EDUCATION
PART B, INDIVIDUALS WITH DISABILITIES EDUCATION ACT, AS AMENDED

OMB NO: 1820-0043

FORM EXPIRES: 10/31/2012

2009

STATE: NV - NEVADA

SECTION A. DATA COLLECTION DATE

COUNT DATE:	<u>OCTOBER</u>	<u>1</u>	<u>2009</u>
	MONTH	DAY	YEAR

TABLE 1
REPORT OF CHILDREN WITH DISABILITIES RECEIVING SPECIAL EDUCATION
PART B, INDIVIDUALS WITH DISABILITIES EDUCATION ACT, AS AMENDED

2009

STATE: NV - NEVADA

SECTION B. DISCRETE AGE BY DISABILITY FOR CHILDREN AGES 3-5 RECEIVING SPECIAL EDUCATION

DISABILITY	AGE AS OF DATA COLLECTION DATE				
	3	4	5	3-5	3-5 (PERCENT) ¹
MENTAL RETARDATION	34	29	38	101	1%
HEARING IMPAIRMENTS	17	35	26	78	1%
SPEECH OR LANGUAGE IMPAIRMENTS	211	403	633	1247	18%
VISUAL IMPAIRMENTS	5	5	6	16	0%
EMOTIONAL DISTURBANCE	0	1	1	2	0%
ORTHOPEDIC IMPAIRMENTS	19	22	24	65	1%
OTHER HEALTH IMPAIRMENTS	28	45	55	128	2%
SPECIFIC LEARNING DISABILITIES	0	1	7	8	0%
DEAF-BLINDNESS	0	0	1	1	0%
MULTIPLE DISABILITIES	35	36	30	101	1%
AUTISM	156	212	244	612	9%
TRAUMATIC BRAIN INJURY	2	5	4	11	0%
DEVELOPMENTAL DELAY ²	1052	1692	1758	4502	66%
TOTAL: (Sum of all of the above)	1559	2486	2827	6872	100%

¹ STATES SHOULD NOT PROVIDE PERCENTAGES IN THIS SECTION, AS THEY WILL BE CALCULATED AFTER THE COUNTS ARE SUBMITTED.

² States must have defined and established eligibility criteria for developmental delay in order to use this category for reporting.

REPORT OF CHILDREN WITH DISABILITIES RECEIVING SPECIAL EDUCATION
PART B, INDIVIDUALS WITH DISABILITIES EDUCATION ACT, AS AMENDED

OMB NO: 1820-0043

FORM EXPIRES: 10/31/2012

2009

STATE: NV - NEVADA

SECTION C. RACE/ETHNICITY BY DISABILITY OF CHILDREN AGES 3-5 RECEIVING SPECIAL EDUCATION

DISABILITY	RACE/ETHNICITY					
	AMERICAN INDIAN OR ALASKA NATIVE	ASIAN OR OTHER PACIFIC ISLANDER	BLACK (NOT HISPANIC)	HISPANIC	WHITE HISPANIC) (NOT	TOTAL
MENTAL RETARDATION	2	8	7	47	37	101
HEARING IMPAIRMENTS	0	5	4	32	37	78
SPEECH OR LANGUAGE IMPAIRMENTS	27	44	73	254	849	1247
VISUAL IMPAIRMENTS	0	2	2	4	8	16
EMOTIONAL DISTURBANCE	0	0	1	0	1	2
ORTHOPEDIC IMPAIRMENTS	1	1	4	21	38	65
OTHER HEALTH IMPAIRMENTS	1	5	5	44	73	128
SPECIFIC LEARNING DISABILITIES	0	2	1	2	3	8
DEAF-BLINDNESS	1	0	0	0	0	1
MULTIPLE DISABILITIES	1	6	7	39	48	101
AUTISM	3	37	69	158	345	612
TRAUMATIC BRAIN INJURY	0	2	4	3	2	11
DEVELOPMENTAL DELAY ¹	92	129	431	1616	2234	4502
TOTAL: (Sum of all of the above)	128	241	608	2220	3675	6872
TOTAL (PERCENT) ²	2%	4%	9%	32%	53%	100%

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REPORT OF CHILDREN WITH DISABILITIES RECEIVING SPECIAL EDUCATION
PART B, INDIVIDUALS WITH DISABILITIES EDUCATION ACT, AS AMENDED

2009

STATE: NV - NEVADA

SECTION D. DISCRETE AGE BY DISABILITY OF CHILDREN AGE 6-21 RECEIVING SPECIAL EDUCATION

DISABILITY	AGE AS OF DATA COLLECTION DATE					
	6	7	8	9	10	11
MENTAL RETARDATION	97	117	113	120	118	136
HEARING IMPAIRMENTS	28	35	34	44	42	47
SPEECH OR LANGUAGE IMPAIRMENTS	1230	1283	1227	984	710	366
VISUAL IMPAIRMENTS	15	11	8	12	14	8
EMOTIONAL DISTURBANCE	52	84	102	126	147	173
ORTHOPEDIC IMPAIRMENTS	20	32	26	22	21	27
OTHER HEALTH IMPAIRMENTS	183	183	217	273	266	277
SPECIFIC LEARNING DISABILITIES	452	715	1066	1528	1983	2274
DEAF-BLINDNESS	1	1	0	3	0	0
MULTIPLE DISABILITIES	51	60	75	65	71	65
AUTISM	315	330	302	273	249	206
TRAUMATIC BRAIN INJURY	9	10	10	10	16	18
DEVELOPMENTAL DELAY ¹	-9	-9	-9	-9		
TOTAL: (Sum of all the above)	2453	2861	3180	3460	3637	3597

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PART B, INDIVIDUALS WITH DISABILITIES EDUCATION ACT, AS AMENDED

2009

STATE: NV - NEVADA

SECTION D (CONTINUED)

DISABILITY	AGE AS OF DATA COLLECTION DATE					
	12	13	14	15	16	17
MENTAL RETARDATION	166	169	124	143	164	135
HEARING IMPAIRMENTS	43	37	28	37	44	23
SPEECH OR LANGUAGE IMPAIRMENTS	176	105	36	23	19	12
VISUAL IMPAIRMENTS	16	12	16	17	14	10
EMOTIONAL DISTURBANCE	167	196	209	200	239	183
ORTHOPEDIC IMPAIRMENTS	26	24	28	15	16	19
OTHER HEALTH IMPAIRMENTS	277	286	287	328	289	236
SPECIFIC LEARNING DISABILITIES	2303	2426	2436	2449	2350	2155
DEAF-BLINDNESS	1	1	1	1	1	0
MULTIPLE DISABILITIES	62	72	71	62	79	74
AUTISM	210	173	171	152	134	106
TRAUMATIC BRAIN INJURY	9	11	13	14	21	28
DEVELOPMENTAL DELAY						
TOTAL: (Sum of all the above)	3456	3512	3420	3441	3370	2981

ED FORM: 869-5

TABLE 1

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PART B, INDIVIDUALS WITH DISABILITIES EDUCATION ACT, AS AMENDED

2009

STATE: NV - NEVADA

SECTION D (COUNTINUED)

DISABILITY	AGE AS OF DATA COLLECTION DATE							
	18	19	20	21	6-21 (Actual Data)	22+ (Optional)	6-22+ (Optional)	6-21 (PERCENT) ¹
MENTAL RETARDATION	104	62	69	44	1881	-9	-9	5%
HEARING IMPAIRMENTS	10	2	2	1	457	-9	-9	1%
SPEECH OR LANGUAGE IMPAIRMENT	1	0	0	0	6172	-9	-9	15%
VISUAL IMPAIRMENT	2	2	0	1	158	-9	-9	0%
EMOTIONAL DISTURBANCE	85	19	10	1	1993	-9	-9	5%
ORTHOPEDIC IMPAIRMENTS	8	6	2	0	292	-9	-9	1%
OTHER HEALTH IMPAIRMENTS	83	25	8	3	3221	-9	-9	8%
SPECIFIC LEARNING DISABILITIES	768	161	51	21	23138	-9	-9	56%
DEAF-BLINDNESS	1	1	0	0	12	-9	-9	0%
MULTIPLE DISABILITIES	67	45	77	30	1026	-9	-9	2%
AUTISM	42	26	15	7	2711	-9	-9	7%
TRAUMATIC BRAIN INJURY	8	3	2	0	182	-9	-9	0%
DEVELOPMENTAL DELAY ²					-9		-9	0%
TOTAL (Sum of all the above)	1179	352	236	108	41243	-9	-9	100%

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ED FORM: 869-5

REPORT OF CHILDREN WITH DISABILITIES RECEIVING SPECIAL EDUCATION
PART B, INDIVIDUALS WITH DISABILITIES EDUCATION ACT, AS AMENDED

OMB NO: 1820-0043

FORM EXPIRES: 10/31/2012

2009

STATE: NV - NEVADA

SECTION E. RACE/ETHNICITY BY DISABILITY OF CHILDREN AGES 6-21 RECEIVING SPECIAL EDUCATION

DISABILITY	RACE/ETHNICITY					TOTAL
	AMERICAN INDIAN OR ALASKA NATIVE	ASIAN OR OTHER PACIFIC ISLANDER	BLACK (NOT HISPANIC)	HISPANIC	WHITE (NOT HISPANIC)	
MENTAL RETARDATION	40	124	314	699	704	1881
HEARING IMPAIRMENTS	7	45	34	188	183	457
SPEECH OR LANGUAGE IMPAIRMENTS	147	357	544	1807	3317	6172
VISUAL IMPAIRMENTS	2	6	20	52	78	158
EMOTIONAL DISTURBANCE	38	33	454	291	1177	1993
ORTHOPEDIC IMPAIRMENTS	4	12	35	87	154	292
OTHER HEALTH IMPAIRMENTS	66	75	491	573	2016	3221
SPECIFIC LEARNING DISABILITIES	561	720	4179	8787	8891	23138
DEAF-BLINDNESS	0	1	3	1	7	12
MULTIPLE DISABILITIES	10	73	164	333	446	1026
AUTISM	35	242	271	628	1535	2711
TRAUMATIC BRAIN INJURY	6	9	31	69	67	182
DEVELOPMENTAL DELAY ¹	-9	-9	-9	-9	-9	-9
TOTAL (Sum of all the above)	916	1697	6540	13515	18575	41243
TOTAL (PERCENT) ²	2%	4%	16%	33%	45%	100%

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2009

REPORT DUE NO LATER THAN FEBRUARY 1, 2010

STATE: NV - NEVADA

SECTION F. - CERTIFICATION

I CERTIFY that these data represent an accurate and unduplicated count of children with disabilities receiving special education and related services according to an Individualized Education Program on my State's designated child count date, which falls between October 1 and December 1 of 2008.		
AUTHORIZING OFFICIAL		
Keith W. Rheault, Supt. Of Public Instruction		1/27/10
NAME AND TITLE (TYPE OR PRINT)	SIGNATURE	DATE OF SIGNATURE

ED FORM: 869-5

U.S. DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION
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OFFICE OF SPECIAL EDUCATION
PROGRAMS

TABLE 1

COMMENTS

**REPORT OF CHILDREN WITH DISABILITIES RECEIVING SPECIAL EDUCATION
PART B, INDIVIDUALS WITH DISABILITIES EDUCATION ACT, AS AMENDED**

2009

STATE: NV - NEVADA

COMMENTS

This image shows a single sheet of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

ORIGINAL SUBMISSION
CURRENT DATE: January 27, 2010
Version Date: